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HEGELVED CENTRAL PAX CENTER

Date: May 10, 2006

MAY 1 n 2006

#### FACSIMILE COVER LETTER

Facsimile Number: 571-273-8300

To:

Examiner CRAIG A. RENNER Group Art Unit 2627, USPTO

From:

Mr. Daniel J. Stanger

MATTINGLY, STANGER, MALUR & BRUNDIDGE, P.C.

Re:

USSN 10/765,108

Attorney Docket No.: 500.43441X00

#### CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following listed documents are being facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below:

> PTO-1083 TRANSMITTAL; AND REPLY (INCLUDING ONE REPLACEMENT SHEET OF FIG. 27).

> > May 10, 2006

Daniel J. /Stanggr

32,846 Reg. No.

Date

Total Number of Pages (including cover sheet):

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Form PTO-1083

**Patent** 

Case Docket No. 500.43441X00

In RE application of

S. NISHIYAMA et al.

Serial No.:

10/765,108

Group Art Unit: 2627

RECEIVED CENTRAL FAX CENTER

MAY 1 n 2006

Filed: January 28, 2004 For:

FLEXIBLY STRUCTURED CASING FOR STORAGE APPARATUS ACCOMMODATING DIFFERENT

Examiner: CRAIG A. RENNER

SCALES (AS AMENDED)

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

May 10, 2006

Sir:

Transmitted herewith is an Amendment in the above-identified application.

Small entity of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.

A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.

No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra
Total	18	Minus	** 20	= 0
Indep.	3	Minus	*** 3	= 0
First prese	ntation of Multi	ple Depend	lent Claims	

SMALL ENTITY				
Rate	Additional Fee	OR		
X 25	\$			
X 100	\$			
X 180	\$			
Total	\$	OR		
	X 25 X 100 X 180	Rate		

SMALL ENTITY			
Rate	Additional Fee		
X 50	\$		
X 200	\$		
X 360	\$		
Total	\$		

OTHER THAN A

If the entry in Col. 1 is less than the entry in Col. 2, write "0" in col. 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space, if the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior Amendment or the number of claims originally filled.

Please charge my Deposit Account No. 50-1417 in the amount of § A Credit Card Payment Form in the amount of \$\_ \_is attached.

The Commissioner is hereby authorized to charge payment of the following fees associated with this [2] communication or credit any overpayments to Deposit Account No. 50-1417.

Any filing fees under 37 CFR 1.16 for the presentation of extra claims.

Any patent application processing fees under 37 CFR 1.17.

Any Extension of Time fees that are necessary, which are hereby regulested if necessary.

Mattingly, Stanger, Malur & Brundidge, P.C. 1800 Diagonal Road, Suite 370 Alexandria, Virginia 22312

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Daniel J Stanger, Reg. No. 32,846 Attorney for Applicant(s)

May 10, 2006

## 500.43441X00 IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

S. NISHIYAMA, et al

RECEIVED **CENTRAL FAX CENTER** 

Serial No.:

10/765,108

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MAY 1 n 2006

Filed:

January 28, 2004

Examiner: CRAIG A. RENNER

For:

FLEXIBLY STRUCTURED CASING FOR STORAGE APPARATUS ACCOMMODATING

DIFFERENT SCALES (AS AMENDED)

### REPLY

**Commissioner for Patents** P.O. Box 1450 Alexandria, VA 22313-1450 May 10, 2006

Sir:

In Reply to the Office Action mailed February 10, 2006, please amend the application as set forth below.